



Montana Department of
LABOR & INDUSTRY
Unemployment Insurance Division

Montana UI Contributions eFiling Handbook

Instructions & Specifications

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Introduction

The Montana Department of Labor and Industry (“DLI”) provides several ways for employers and third party administrators to electronically file their Unemployment Insurance (UI) wage and tax reports. These methods are in addition to manually entering wages online through our *UI eServices for Employers* website and involve the creation of an electronic file in one of several formats, and submitting that file to DLI in several ways. The manual entry of wages is not covered in this document.

Should you have additional questions, please feel free to contact one of the persons listed in Appendix B – Contact Us.

File Formats

The state accepts electronic UI wage and tax reports in four different formats:

1. ICESA – Individual or Bulk Filing.
2. FSET – Individual or Bulk Filing
3. A Montana-unique format using Comma-Separated Values (CSV) – UI eServices for Employers
4. A Montana-unique format using Microsoft Excel – UI eServices for Employers

Both ICESA and FSET allow for multiple employers’ information in one file and are commonly used by firms who do payroll for multiple clients. However, individual businesses only reporting one employer can use these formats as well. These files can be directly submitted to DLI using a new Web Service. In addition, we will also allow ICESA and FSET files to be attached to a web message within our *UI eServices for Employers* website and delivered securely that way as well. This option does require manual intervention (on both sides) and the size of the file may be limited. We will also continue to accept ICESA (not FSET) files via the State of Montana Secure File Transfer Service available today as well as on CD or Diskette. However, we are considering phasing out these more manual options at some point.

The CSV and Excel formats only accommodate the information for one employer per file. These files can only be submitted by logging into our *UI eServices for Employers* website and uploading them.

The different filing methods will be discussed more fully below.

ICESA Format

No changes to the standard have been made.

In the ICESA format, the output records must be arranged as follows:

- There can be only one 'A', 'B', and 'F' record per file.
- Each 'E' record must be followed by at least one 'S' record. (Exception - if the "No Workers/No Wages" field contains a zero, there may not be any 'S' records for that employer.)
- One 'T' record must follow the last 'S' record for each set of 'E' and 'S' records. (Exception - 'T' record must follow the 'E' record if the "No Workers/No Wages" field contains a zero.)
- One 'F' record must follow the last 'T' record and must be the last record on the file.

Examples:

- For a single employer filer with 'S' records:
A, B, E, S, S, , S, T, F
- For single employer filer with **no** 'S' records:
A, B, E, T, F
- For bulk (multiple) employer filer:
A,B,E,S,S,,,,,,,,S,T,E,S,S,,,,,,,,S,T,E,S,S,,,,,,,,T,F

Data Record Descriptions

Code A: Transmitter Record

- Identifies the organization submitting the file.

Code B: Authorization Record

- Identifies the type of equipment used to generate the file.

Code E: Employer Record

- Identifies an employer whose employee wage and/or tax information is being reported.
- Generate a new Code E each time a different employer's information begins.

Code S: Employee Record

- Used to report wage data for an employee.
- Should follow its related Code E record or it could follow an associated Code S record, which in turn follows a related Code E record.
- Do not generate a Code S record if only blanks would be entered after the record identifier.
- There should be no Code S records if "No Workers/No Wages" field on preceding Code E record contains a zero.

Name formats on the Code S Record

- Must agree with the spelling of the name on the individual's Social Security Card.
- Parts of a compound surname must be connected by a hyphen. Single letter prefixes (e.g., "O", "D") must not be separated from the rest of the surname by a blank, but should be connected by an apostrophe.
- Punctuation may be used when appropriate.
- Lower case letters are not acceptable.
- Do not include any titles in the name. Titles make it difficult to determine an individual's name and may prevent properly crediting earnings data.

Money Amounts

- All money fields are strictly numeric.
- Must include dollars and cents with the decimal point assumed.
- Do not use any punctuation in any money field.
- **NEGATIVE (CREDIT) MONEY AMOUNTS ARE NOT ALLOWED.**
- Right justify and zero fill all money fields.
- In a money field that is not applicable, enter zeros.

Code T: Total Record

- Contains the totals for all Code S records reported since the last Code E record.
- The totals must all be zeros if there are no Code S records because the Code E "No Workers/No Wages" field contains a zero.
- Must be generated for each Code E record.
- See the Employee Wage Record (Code S) description for information about reporting money amounts.
- The UI Tax data is extracted from this record.

Code F: Final Record

- Indicates the end of the file and **MUST** be the last data record on each file.
- Must appear only once on each file, after the last Code T record.
- See the Employee Wage Record (Code S) description for information about reporting money amounts.

“A” Record Type: Transmitter Record

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Descriptions and Remarks
1	Record Identifier	1	A/N	Constant “A”
2-5	Year	4	A/N	Enter the year for which this report is being prepared. UPDATE EACH YEAR.
6-14	Transmitter's Federal Employer Identification Number	9	A/N	Transmitter's Federal Employer ID number. Enter only numeric characters. Omit hyphen, prefixes & suffixes.
15-18	Taxing Entity Code	4	A/N	Constant “UTAX”
19-23	Blank	5	A/N	Enter blanks.
24-73	Transmitter Name	50	A/N	Enter the name of the organization submitting the file. Exactly as the Employer is registered with the state Unemployment Insurance agency.
74-113	Transmitter Street Address	40	A/N	Enter the street address of the organization submitting the file.
114-138	Transmitter City	25	A/N	Enter the city of the organization submitting the file.
139-140	Transmitter State	2	A/N	Enter the standard two character FIPS postal abbreviation. See code table below.
141-153	Blank	13	A/N	Enter blanks.
154-158	Transmitter Zip Code	5	A/N	Enter a valid zip code.
159-163	Transmitter Zip Code Extension	5	A/N	Use this field as necessary for the four digit extension of the zip code. Include hyphen in position 159. If unknown, fill with blanks.
164-193	Transmitter Contact	30	A/N	Title of individual from transmitter organization who is responsible for the accuracy and completeness of the wage report.
194-203	Transmitter Contact Telephone Number	10	A/N	Telephone number at which the transmitter contact can be reached.
204-207	Telephone Extension/Box	4	A/N	Enter transmitter telephone extension or message box.
208-213	Tape Transmitter/Authorization Number	6	A/N	Enter Blanks Not required by Montana.
214	C-3 Data	1	A/N	Enter blanks. Not required by Montana.
215-219	Suffix Code	5	A/N	Enter blanks. Not required by Montana.
220	Allocation Lists	1	A/N	Enter blanks. Not required by Montana.
221-229	Service Agent I.D.	9	A/N	Enter blanks. Not required by Montana.
230-242	Total Remittance Amount	13	A/N	Enter blanks. Not required by Montana.
243-248	Media Creation Date	6	A/N	Enter date: MMDDYY
249-275	Blank	27	A/N	Enter blanks.

“B” Record Type: Authorization Record

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
1	Record Identifier	1	A/N	Constant “B”.
2-5	Payment Year	4	A/N	Enter the year for which this report is being prepared. UPDATE EACH YEAR.
6-14	Transmitter’s Federal EIN	9	A/N	Transmitter’s Federal Employer ID number. Enter only numeric characters. Omit hyphens, prefixes & suffixes.
15-22	Computer	8	A/N	Enter the manufacturer’s name.
23-24	Internal Label	2	A/N	Enter blanks. Not required by Montana.
25	Blank	1	A/N	Enter a blank.
26-27	Density	2	A/N	Enter blanks. Not required by Montana.
28-30	Recording Code (Character Set)	3	A/N	Use only ASCII
31-32	Number of Tracks	2	A/N	Enter blanks. Not required by Montana.
33-34	Blocking Factor	2	A/N	Enter blanks. Not required by Montana.
35-38	Taxing Entity Code	4	A/N	Constant “UTAX”
39-146	Blank	108	A/N	Enter blanks.
147-190	Organization Name	44	A/N	Enter blanks. Not required by Montana.
191-225	Street Address	35	A/N	Enter blanks. Not required by Montana.
226-245	City	20	A/N	Enter blanks. Not required by Montana.
246-247	State	2	A/N	Enter blanks. Not required by Montana.
248-252	Blank	5	A/N	Enter blanks.
253-257	Zip Code	5	A/N	Enter blanks. Not required by Montana.
258-262	Zip Code Extension	5	A/N	Enter blanks. Not required by Montana.
263-275	Blank	13	A/N	Enter blanks.

“E” Record Type: Employer Record

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
1	Record Identifier	1	A/N	Constant “E”
2-5	Year	4	A/N	Enter the year for which this report is being prepared. UPDATE EACH YEAR.
6-14	Employer’s Federal EIN	9	A/N	Employer’s Federal Employer ID number. Enter only numeric characters. Omit hyphens, prefixes & suffixes.
15-23	Blank	9	A/N	Enter blanks.
24-73	Employer Name	50	A/N	Enter the name of the Employer reporting wage and tax data. Exactly as the Employer is registered with the state Unemployment Insurance agency.
74-113	Employer Street Address	40	A/N	Enter the street address of the Employer.
114-138	Employer City	25	A/N	Enter the city of the Employer’s mailing address.
139-140	Employer State	2	A/N	Enter the standard two character FIPS postal abbreviation. See code table below.
141-148	Blank	8	A/N	Enter blanks.
149-153	Employer Zip Code Extension	5	A/N	Enter four-digit extension of zip code being sure to include the hyphen in position 149. If unknown, fill with blanks.
154-158	Employer Zip Code	5	A/N	Enter a valid zip code.
159	Name Code	1	A/N	Enter blanks. Not required by Montana.
160	Type of Employment	1	A/N	Enter blanks. Not required by Montana.
161-162	Blocking Factor	2	A/N	Enter blanks. Not required by Montana.
163-166	Establishment Number or coverage Group/PRU	4	A/N	Enter blanks. Not required by Montana.
167-170	Taxing Entity Code	4	A/N	Constant “UTAX”.
171-172	State Identifier Code	2	A/N	Enter the state FIPS postal numeric code for the state to which wages are being reported. MT=30.
173-187	State UI Employer Account Number	15	A/N	Enter the state UI employer account number.
188-189	Reporting Period	2	A/N	Enter the last month of the calendar quarter to which the report applies. “03”= 1 st Quarter “09”= 3 rd Quarter “06”= 2 nd Quarter “12”= 4 th Quarter

“E” Record Type: Employer Record (continued)

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
190	No Workers/ No Wages	1	A/N	0= Indicates that the E record will not be followed by S records, employee records. 1= Indicates that the E record will be followed by S records, employee records.
191	Tax Type Code	1	A/N	Enter blanks. Not required by Montana.
192-196	Taxing Entity Code	5	A/N	Enter blanks. Not required by Montana.
197-203	State Control Number	7	A/N	Enter blanks. Not required by Montana.
204-208	Unit Number	5	A/N	Enter blanks. Not required by Montana.
209-255	Blank	47	A/N	Enter blanks. Not required by Montana.
256	Foreign indicator	1	A/N	If data in positions 74-158 is for a foreign address, enter the letter “X”, else a blank. Not required by Montana.
257	Type of Information	1	A/N	If file contains only tax information, enter a “T”. If file contains both wage and tax information, enter a “B”.
258-266	Other EIN	9	A/N	Enter blanks. Not required by Montana.
267-275	Blank	9	A/N	Enter blanks.

“S” Record Type: Employee Record

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
1	Record Identifier	1	A/N	Constant “S”.
2-10	Social Security Number	9	A/N	Employee’s Social Security number. If not known, enter “I” in position 2 and blanks in positions 3-10.
11-30	Employee Last Name	20	A/N	Enter employee’s last name.
31-42	Employee First Name	12	A/N	Enter employee’s first name.
43	Employee Middle Initial	1	A/N	Enter employee’s middle initial. If no middle initial, enter a blank.
44-45	State Code	2	A/N	Enter the state FIPS postal numeric code for the state to which wages are being reported. MT = 30.
46-49	Reporting Quarter and Year	4	A/N	Enter the last month and year for the quarter this report applies; e.g. “0313” Jan-March of 2013.
50-63	State Quarter Total Gross Wages	14	N	Enter blanks. Not required by Montana.
64-77	State Quarter UI Total Gross Wages	14	N	Enter quarterly gross wages subject to Unemployment taxes. Include all tip income.
78-91	State Quarter UI Excess Wages	14	N	Quarterly wages in excess of the state UI taxable wage base. For Governmental or Reimbursable accounts, excess must be zeros.
92-105	State Quarter UI Taxable Wages	14	N	State quarterly UI total wages minus state quarterly UI excess wages. For Governmental and Reimbursable employers, must be equal to “State Quarter UI Total Gross Wages”.
106-120	Quarterly State Disability Insurance Taxable Wages	15	N	Enter zeros. Not required by Montana.
121-129	Quarterly Tip Wages	9	N	Enter blanks. Not required by Montana.
130-131	Number of Weeks Worked	2	A/N	Enter blanks. Not required by Montana.
132-134	Number of Hours Worked	3	A/N	Enter blanks. Not required by Montana.
135-138	Date First Employed	4	A/N	Enter blanks. Not required by Montana.
139-142	Date of Separation	4	A/N	Enter blanks. Not required by Montana.
143-146	Taxing Entity Code	4	A/N	Constant “UTAX”.
147-161	State UI Employer Account Number	15	A/N	State account number assigned for unemployment insurance reporting purposes.
162-176	Unit/Division Location/Plant Code	15	A/N	Enter blanks. Not required by Montana.
177-190	State Taxable Wages	14	A/N	Enter blanks. Not required by Montana.

“S” Record Type: Employee Record (continued)

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
191-204	State Income Tax Withheld	14	A/N	Enter blanks. Not required by Montana.
205-206	Seasonal Indicator	2	A/N	Enter blanks. Not required by Montana.
207	Employer Health Insurance Code	1	A/N	Enter blanks. Not required by Montana.
208	Employee Health Insurance Code	1	A/N	Enter blanks. Not required by Montana.
209	Probationary Code	1	A/N	Enter blanks. Not required by Montana.
210	Officer Code	1	A/N	Enter blanks. Not required by Montana.
211	Wage Plan Code	1	A/N	Enter blanks. Not required by Montana.
212	Month 1 Employment	1	A/N	Enter “1” if employee covered by UI worked during or received pay for the pay period including the 12 th day of the 1 st month of the reporting period. Enter “0” if employee covered by UI did not work and received no pay for the pay period including the 12 th day of the 1 st month of the reporting period. Enter blanks if not available.
213	Month 2 Employment	1	A/N	Enter “1” if employee covered by UI worked during or received pay for the pay period including the 12 th day of the 2nd month of the reporting period. Enter “0” if employee covered by UI did not work and received no pay for the pay period including the 12 th day of the 2nd month of the reporting period. Enter blanks if not available.
214	Month 3 Employment	1	A/N	Enter “1” if employee covered by UI worked during or received pay for the pay period including the 12 th day of the 3rd month of the reporting period. Enter “0” if employee covered by UI did not work and received no pay for the pay period including the 12 th day of the 3rd month of the reporting period. Enter blanks if not available.
215-220	Blanks	6	A/N	Enter blanks.
221-226	Date First Employed	6	A/N	Enter blanks. Not required by Montana.
227-232	Date of Separation	6	A/N	Enter blanks. Not required by Montana.
233-275	Blanks	43	A/N	Enter blanks.

“T” Record Type: Total Record

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
1	Record Identifier	1	A/N	Constant “T”.
2-8	Total Number of Employees	7	N	The total number of “S” records reported since the last “E” record.
9-12	Taxing Entity Code	4	A/N	Constant “UTAX”
13-26	State Quarter Total Gross Wages for Employer	14	N	Enter blanks. Not required by Montana.
27-40	State Quarter UI Total Gross Wages for Employer	14	N	Quarterly Gross Wages subject to state UI Tax. Include all tip income. Total of this field on all “S” records since the last “E” record.
41-54	State Quarter UI Excess Wages for Employer	14	N	Quarterly Wages in excess of the state UI Taxable wage base. Total of this field on all “S” records since the last “E” record. For Governmental or Reimbursable Employers , excess must be zeros.
55-68	State Quarterly UI Taxable Wages for Employer	14	N	State quarterly UI Total Gross Wages minus State quarterly UI Excess Wages. Total of this field on all “S” records since the last “E” record. For Governmental and Reimbursable Employers, must be equal to “State Quarter UI Total Gross Wages”.
69-81	Quarterly Tip Wages for Employer	13	N	Enter blanks. Not required by Montana.
82-87	Total UI Tax Rate this Quarter	6	A/N	The employer’s Total UI Tax rate for this reporting period. Decimal point followed by 5 digits, e.g., 3.1% = .03100. For Regular and Governmental employers it is equal to the UI Contribution Rate plus the Administrative Fund Tax Rate as shown on the yearly rate notice covering this reporting period.
88-100	State Quarterly UI Taxes Due	13	N	UI taxes due. Quarterly state UI taxable wages multiplied by the total UI tax rate.
101-111	Previous Quarter(s) Adjustments	11	N	Enter any adjustments or amendments to previous quarter reports. Enter zeros if not applicable.
112-122	Interest on Late Payments	11	N	Interest is computed at the rate of 1.5% per month or 18% per year of the amount in “State Quarterly UI Taxes Due” field. Enter zeros if not applicable.

“T” Record Type: Total Record (continued)

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
123-133	Penalty	11	N	The penalty for being late is \$25.00. Enter zeros if not applicable.
134-144	Credit\Overpayment	11	N	Enter here any overpayment existing on your account on the date this report was generated. Overpayments (credits) are subject to prior usage. Enter zeros if not applicable.
145-148	Employer Assessment Rate	4	A/N	Enter blanks. Not required by Montana.
149-159	Employer Assessment Amount	11	N	Enter zeros. Not required by Montana.
160-163	Employee Assessment Rate	4	A/N	Enter blanks. Not required by Montana.
164-174	Employee Assessment Amount	11	N	Enter zeros. Not required by Montana.
175-185	Total Payment Due	11	N	Enter the total of “State Quarterly UI Taxes Due” plus “Previous Quarter(s) Adjustments” plus “Interest” plus “Penalty”, minus any amount in “Credit/Overpayment”. Enter zeros if not applicable.
186-198	Allocation Amount	13	N	Enter zeros. Not required by Montana.
199-212	Wages Subject to State Income Tax	14	N	Enter zeros. Not required by Montana.
213-226	State Income Tax Withheld	14	N	Enter zeros. Not required by Montana.
227-233	Month 1 Employment	7	A/N	Total number of employees covered by UI who worked on or received pay for the pay period including the 12 th day of the first month of the reporting period. Enter blanks if not available.
234-240	Month 2 Employment	7	A/N	Total number of employees covered by UI who worked on or received pay for the pay period including the 12 th day of the second month of the reporting period. Enter blanks if not available.
241-247	Month 3 Employment	7	A/N	Total number of employees covered by UI who worked on or received pay for the pay period including the 12 th day of the third month of the reporting period. Enter blanks if not available.
248-250	County Code	3	A/N	Enter blanks. Not required by Montana.
251-257	Outside County Employees	7	A/N	Enter blanks. Not required by Montana.
258-267	Document Control Number	10	A/N	Enter blanks. Not required by Montana.
268-275	Blanks	8	A/N	Enter blanks.

“F” Record Type: Final Record

A/N = Alphanumeric; left justified and blank filled.

N = Numeric; left justified, zero filled, unsigned, do not include decimal in fields containing dollars and cents.

Location	Field	Length	Type	Description and Remarks
1	Record Identifier	1	A/N	Constant “F”.
2-11	Total Number of Employees in File	10	N	Enter blanks. Not required by Montana.
12-21	Total Number of Employers in File	10	N	Enter blanks. Not required by Montana.
22-25	Taxing Entity Code	4	A/N	Enter blanks. Not required by Montana.
26-40	Quarterly Total Gross Wages in File	15	N	Enter blanks. Not required by Montana.
41-55	Quarterly State UI Gross/Total Wages in File	15	N	Enter blanks. Not required by Montana.
56-70	Quarterly State UI Excess Wages in File	15	N	Enter blanks. Not required by Montana.
71-85	Quarterly State UI Taxable Wages in File	15	N	Enter blanks. Not required by Montana.
86-100	Quarterly State Disability Insurance Taxable Wages in File	15	N	Enter blanks. Not required by Montana.
101-115	Quarterly Tip Wages in File	15	N	Enter blanks. Not required by Montana.
116-123	Month 1 Employment for Employers in File	8	A/N	Enter blanks. Not required by Montana.
124-131	Month 2 Employment for Employers in File	8	A/N	Enter blanks. Not required by Montana.
132-139	Month 3 Employment for Employers in File	8	A/N	Enter blanks. Not required by Montana.
140-275	Blanks	136	A/N	Enter Blanks.

**FEDERAL INFORMATION PROCESSING STANDARD (FIPS 5-2) POSTAL ABBREVIATION AND
NUMERIC CODES**

	Abbreviation	Numeric Code		Abbreviation	Numeric Code
Alabama	AL	01	Montana	MT	30
Alaska	AK	02	Nebraska	NE	31
Arizona	AZ	04	Nevada	NV	32
Arkansas	AR	05	New Hampshire	NH	33
California	CA	06	New Jersey	NJ	34
Colorado	CO	08	New Mexico	NM	35
Connecticut	CT	09	New York	NY	36
Delaware	DE	10	North Carolina	NC	37
District of Columbia	DC	11	North Dakota	ND	38
Florida	FL	12	Ohio	OH	39
Georgia	GA	13	Oklahoma	OK	40
Hawaii	HI	15	Oregon	OR	41
Idaho	ID	16	Pennsylvania	PA	42
Illinois	IL	17	Rhode Island	RI	44
Indiana	IN	18	South Carolina	SC	45
Iowa	IA	19	South Dakota	SD	46
Kansas	KS	20	Tennessee	TN	47
Kentucky	KY	21	Texas	TX	48
Louisiana	LA	22	Utah	UT	49
Maine	ME	23	Vermont	VT	50
Maryland	MD	24	Virginia	VA	51
Massachusetts	MA	25	Washington	WA	53
Michigan	MI	26	West Virginia	WV	54
Minnesota	MN	27	Wisconsin	WI	55
Mississippi	MS	28	Wyoming	WY	56
Missouri	MO	29			

TERRITORIES AND POSSESSIONS

	Abbreviation	Numeric Code
American Samoa	AS	60
Guam	GU	66
Puerto Rico	PR	72
Northern Mariana Islands	MP	69
Virgin Islands	VI	78

MILITARY POST OFFICES (APO AND FPO)

Canada, Europe, Africa and the Middle East	AE	Central and South America	AA
Alaska and the Pacific	AP	Contingency Operations	AC

Submitting Your ICESA File

Please see Appendix A for detailed specifications for submitting your file.

ICESA Format Questions

1. Q: What changes were made to the ICESA Format.

A: No changes were made to the standard ICESA Format.

2. Q: Should out of state wages be reported quarter-to-date or year-to-date?

A: We have eliminated the “O” record due to an upcoming rule change. Wages paid to an employee in another state **may not be used** in calculating the employee’s taxable wage in Montana.

3. Q: In the ICESA specifications, in space 257 of the “E” record identifier, a “T” or “B” is required. What do I use if I used to send my file in with a “W”?

A: If a file contains only tax information, please enter a “T” as the type of information. If the file contains both tax and wage information, please enter a “B” as the type of information. If the file you have submitted in the past contained a “W” in this position, please enter a “B” within the new format.

FSET Format

Montana UI will accept FSET files in the FSET 4.4 schema format located at http://www.statemef.com/fset_new.shtml.

In addition to the standard FSET 4.4 fields, the sections and fields defined below are required in each transmission for the file to validate against the schemas. Additional fields may exist in each of the required sections defined by the schemas and they should also be included with correct information.

Required Sections and/or Fields:

- **Transmission** – Standard Fields Required, one per file.
- **Transmission Header** – Standard Fields Required, one per file.
- **ReturnState** – One or more per file. Contains a single ReturnHeaderState and a single, optional FinancialTransaction.
- **ReturnHeaderState** – One Per ReturnState. Contains detail on employer report is for.

ReturnHeaderState Key Fields

Field	Requirement	Notes
TaxYear	Required	
PaidPreparerInformation	Optional	Include with required fields if available
PaidPreparerInformation-Phone	Optional	Include if Paid Preparer Information is available
Filer	Required	
Filer-TIN	Required	
Filer-TIN-TypeTIN	Required	Type should be FEIN
Filer-TIN-TINTypeValue	Required	FEIN Value
Filer-StateEIN	Required	Employer's EAN
Filer-Name	Required	
Filer-Name-BusinessNameLine1	Required	Employers Name
Filer-NameControl	Required	First 4 characters of employers name
ReturnQuarter	Required	Report's Quarter
FilingAction	Required	
FilingAction-Action	Required	Original or Amended Only
FilingAction-Reason	Required if Amended	

- **ReturnDataState-StateUI** – Only StateUI is allowed. Each ReturnState should contain a completed StateUI data set.

StateUI Key Fields		
Field	Requirement	Notes
UITotalWages	Required	
ExcessWages	Required	Must be zero for reimbursing and governmental employers
UITaxableWages	Required	
ReimbursableEmployerElect	Required if account is reimbursing	Required if employer is reimbursable
NoPayrollElect	Required for zero reports	Required for zero report
PayRoll	Required if wages exist	
PayRoll-Employee	Required if wages exist	Detail on employee, one for each employee for the quarter
PayRoll-Employee-Employee	Required if wages exist	
PayRoll-Employee-Employee-FirstName	Required if wages exist	
PayRoll-Employee-Employee-LastName	Required if wages exist	

PayRoll-Employee-Employee-SSN	Required if wages exist	
PayRoll-Employee-TotalWages	Required if wages exist	
PayRoll-Employee- TaxState	Required if wages exist	MT
Month1Employees	Required	
Month2Employees	Required	
Month3Employees	Required	

- **FinancialTransactions-StatePayment** - Optional, only used if an ACH Debit payment is being made. One per ReturnState allowed.

StatePayment Key Fields		
Field	Requirement	Notes
Checking	Optional	Either Checking or Savings is required
Savings	Optional	Either Checking or Savings is required
RoutingTransitNumber	Required	
BankAccountNumber	Required	
PaymentAmount	Required	
RequestedPaymentDate	Required	Should not exceed greater of generated date or due date.
AddendaRecord	Required	Direction Information for the Payment. One per payment.
AddendaRecord-TaxpayerIdentification	Required	Employer's EAN
AddendaRecord-TaxPeriodEndDate	Required	Quarter end date payment is intended to pay
NotIATTransaction	Required	Only non-IAT payments are allowed

Submitting Your FSET File

NOTE: This format will not be accepted until First Quarter 2014, and due April 30, 2014.

Please see the Appendix A for detailed specifications for submitting your file.

Changes Relating to FSET 4.x

The FSET standard is the responsibility of the Tax Information Group for E-Commerce Requirements Standardization, or TIGERS. More information about FSET 4.4, including xml-related information, like schemas and changes, can be found in this zip file: <http://www.statemef.com/projects/fset/FSETV4.4.zip>.

Comma-Separated Values (CSV) Format

NOTE: The CSV file format is designed for individual employer records only and to be uploaded by signing on to our *UI eServices for Employers* website. For bulk (multi-employer) filing options please see our Montana ICESA or FSET file formats.

Our new system will make it easy and convenient to upload wage records using a correctly formatted CSV file. Simply log in, navigate to the quarter you wish to file, choose import, browse to the file location, and click OK. The rest is done for you.

Differences between the old version of the UI tax CSV file format (used in WOW) and this version:

1. New: Header record – Row 1.
2. Changed: Elimination of the middle initial – Note that the old format with the middle initial will still be accepted, but it must be included or excluded for the entire file. It's not used by the system when importing the file so it was removed.

Your CSV file should follow the format below:

Comma separated fields.

Field 1 = Employee Count Month 1

Field 2 = Employee Count Month 2

Field 3 = Employee Count Month 3

Repeating fields for each employee with wages paid during quarter:

- SSN
- Last Name
- First Name
- Total Gross wages for employee for the quarter (with decimals)

Commas should only be used to separate specified fields, do not include additional commas within the gross wage field or any other field.

To import properly, your CSV file should be created as a text file and saved with the .csv extension. If you create your file in Excel, please be sure to save it with the .csv extension.

Example File Format:

```
4,5,4
226426934,Stirling,kristen,8051
458866233,Ellison,kyle,14632
525771076,Bowers,Joe,15537.5
743862598,Miller,Nate,11882
876820290,Snyder,Trevor,10066.5
```

Microsoft Excel Format

NOTE: The MS Excel file format is designed for individual employer records only and to be uploaded by signing on to our *UI eServices for Employers* website. For bulk (multi-employer) filing options please see our Montana ICESA or FSET file formats.

Our new system will make it easy and convenient to upload wage records using a correctly formatted Excel file. Simply log in, navigate to the quarter you wish to file, choose import, browse to the file location, and click OK. The rest is done for you.

Your Excel file should follow the format below:

First line – Employee counts. One month for each of the first three columns. Leave 4th column blank. Do not include commas. Do not include headers.

- Employee count 1st month
- Employee count 2nd month
- Employee count 3rd month

Repeating Rows - Repeated for each employee with wages paid during the quarter.

- First Column – SSN
- Second Column – Last Name
- Third Column – First Name
- Forth Column – Total Gross Wages for Employee (with Decimals)

Example File Layout:

5	5	6	
184378137	Talbert	LAWRENCE	8,051.00
858866233	Ellison	STEVE	4,632.00
825771076	Striling	MICHAEL	5,537.50
943862598	Miller	KYLE	11,882.00
876820290	PIPPER	DANIEL	10,066.50
859980082	Jones	THOMAS	16,156.00

Appendix A – Electronically Submitting Your Wage & Tax Reports

The new system provides several ways in which to electronically file your ICESA or FSET file. One of those methods does not require a human being to log in to the system, but the business entities desiring to use it will need to obtain a user ID and password to send as parameters when they submit their files. This method is provided primarily to enable this process to take place in an entirely automated fashion.

(Note: Just in case anyone is confused, at one time we were going to offer two web services for electronic submission. It was determined that both were not needed and we eliminated the one we had less control over.)

1. Web Service – The specs for the web service are still being developed, but will include the following:

Parameters:

- Username (Required – String) – Username for logging into the web service.
- Password (Required – String) – Password for logging into the web service.
This document will be updated in the near future with the contact information for requesting your Username and Password.
- FileType (Required – String) – The type of file that will be sent in. This will be defined by DLI and sent to each customer depending on the file they are sending in.
- Information (String) – Bidirectional parameter that will give the customer information on the processing of the file.
- Status (String) – Bidirectional parameter that will give the customer information as to the status of the file that has been sent.
- FileDataAsByteArray (Required -- ByteArray) – The data file as a Byte array.

You will require a user ID and password to successfully call this web service. This document will be updated in the near future with the contact information for requesting your user ID and password. You will be requesting it from us, DLI.

When we are further along in our development, we will be providing detailed examples of how to use this service to submit your files.

2. Manual Upload Through the Future *UI eServices for Employers* Website – Electronic files in the ICESA, CSV, and MS Excel formats can be uploaded by logging into the new *UI eServices for Employers* website and choosing the upload function. This method is manual.

Appendix B – Contact Us

All three of the individuals listed below can also be reached at (406) 449-2468. This is a communal phone. If the person you're looking for doesn't answer, just ask for him/her.

- **Project Manager:** Keith Lavender, PMP, PMI-ACP, klavender@mt.gov
- **Business Lead and E-Filing Subject Matter Expert (SME):** Corena Benjamin, cbenjamin@mt.gov
- **E-Filing SME and Outreach Lead:** April Rose, arose@mt.gov

Document Change Log

Date	Version	Who	What
8/29/13	1.0	Montana DLI	Original creation.
8/30/13	1.1	Montana DLI	Added Q&A about the ICESA format.
9/5/13	1.2	Montana DLI	Added additional information about when a user ID and password will be required and where to find more information about the FSET XML format, such as schemas.
9/18/13	1.3	Montana DLI	Correction of secure FTP option to a Web Service option. Miscellaneous updates to verbiage to try to make it clearer.
9/20/13	1.4	Montana DLI	Additional information about the web services to electronically file ICESA and FSET file formats.
10/18/13	1.5	Montana DLI	Removed the first web service (Method 1) as an option for electronic submission. Just isn't needed. Added Appendix B (Contact Us).
01/07/14	1.6	Montana DLI	Removed the requirement to report Out of State Wages in either the ICESA or FSET file formats. Specifically removed the "O" record from ICESA layout and the "out of state" fields in the FSET scheme.